

DEPARTMENT OF STATE

TENNESSEE OPEN APPOINTMENTS  
NOTICE OF CHANGE

(One form to be completed on changes on EACH agency or EACH member)

NAME OF BOARD, COMMISSION, COUNCIL, COMMITTEE, AUTHORITY, TASK FORCE, OR AGENCY

DEPARTMENT

NAME OF MEMBER:

NOTICE OF CHANGE(S): (check those applicable)

	PREVIOUS	NEW
<input type="checkbox"/> ADDRESS: (check one)		
<input type="checkbox"/> BOARD COMMISSION		
<input type="checkbox"/> DEPARTMENT		
<input type="checkbox"/> FOR ABOVE MEMBER		
<input type="checkbox"/> PHONE NUMBER: (check one)		
<input type="checkbox"/> BOARD COMMISSION	( ) -	( ) -
<input type="checkbox"/> DEPARTMENT	( ) -	( ) -
<input type="checkbox"/> FOR ABOVE MEMBER	( ) -	( ) -
<input type="checkbox"/> APPOINTEE'S COUNTY OF RESIDENCE:		
<input type="checkbox"/> APPOINTEE'S LEGISLATIVE DISTRICTS:		
HOUSE NO.:		
SENATORIAL NO.:		
<input type="checkbox"/> CHAIRPERSON:	NAME	NAME
<input type="checkbox"/> CONTACT PERSON:	NAME	NAME
<input type="checkbox"/> OTHER: (explanation)		

ADDITIONAL INFORMATION:

This form was prepared by: NAME  
( ) -  
PHONE NO.  
This form submitted on: (DATE)  
MONTH DAY YEAR

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Open Appointments Act  
Secretary of State  
Division of Publications  
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8th Floor, William R. Snodgrass Tower  
Nashville, TN 37243  
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Fax (615) 741-5133

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